



State of Utah

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Utah Department of Health

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Health Systems Improvement

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Deputy Division Director

Date: May 31, 2005

To: Potential Applicants to the
State Primary Care Grants Program for Medically Underserved Populations

From: Don Beckwith, Health Program Manager
Office of Primary Care and Rural Health

Subject: State Primary Care Grants Program Process for State Fiscal Year 2005-2006

The Office of Primary Care and Rural Health, Utah Department of Health, invites qualified agencies to submit an application for State Primary Care Grants Program funding for State Fiscal Year (SFY) 2005-2006. The State Primary Care Grants Program supports access to health care, by assisting public and non-profit entities with the cost of providing primary care services to medically underserved populations. The grant period covered for awarded agencies will be October 1, 2005 through September 30, 2006. Approximately \$1,000,000 was appropriated by the State of Utah Legislature to fund State Primary Care Grants Program projects. During SFY 2004-2005, an average of \$26,400 was awarded, serving 455 clients.

Applicants should be aware that it is the policy of the Utah Department of Health that agencies awarded under the State Primary Care Grants Program will provide primary care services for the full twelve (12) month grant period, and will ensure that continuity of services is maintained for the full duration of that grant period.

Agencies that received funding last year and are applying for the same Project and Objectives, should not request more than one hundred twenty percent (120%) of the funding awarded during SFY 2004-2005.

Complete, original applications must be submitted to our Office by **Friday, July 29, 2005**. The information must be submitted to:

Office of Primary Care and Rural Health
Utah Department of Health
P.O. Box 142005
Salt Lake City, Utah 84114-2005.

Note that Applications that are incomplete, or submitted after the deadline, may be delayed or denied review.

Applicants should pay particular attention to the quality of your narrative, and assure that your Application is clear, succinct, and answers all of the points listed in the Application. A question and answer conference call session on the Application process will be held on **Wednesday, July 6, 2005 from 1:00 until 2:00 p.m.** The call in number is (801) 521-3615 or 1 (800) 474-2077. This call is no charge to callers. **PLEASE RSVP your participation in the conference call by July 1st to elolsen@utah.gov.**

**Please be aware that the State Primary Care Grants Program
is a competitive program and an Application to the Program
does not guarantee an award or future funding.**



Office of Primary Care and Rural Health
288 North 1460 West • Salt Lake City, Utah
Mailing Address: P.O. Box 142005 • Salt Lake City, Utah 84114-2005
Telephone: (801) 538-6113 • Facsimile: (801) 538-6387 • health.utah.gov/primarycare



**STATE PRIMARY CARE GRANTS PROGRAM
FOR MEDICALLY UNDERSERVED POPULATIONS**

State Fiscal Year 2005-2006 Application Instructions

A COMPLETE ORIGINAL APPLICATION must be submitted by **Friday, July 29, 2005**, to the Office of Primary Care and Rural Health. The Application must be submitted to:

Office of Primary Care and Rural Health
Utah Department of Health
P.O. Box 142005
Salt Lake City, Utah 84114-2005.

Applications that are incomplete, or submitted after the deadline, may be delayed or denied review.

CHECKLIST FOR SUBMITTAL

The **unbound** Application must be submitted in the following order:

- Please note:* A cover letter is not necessary.
- ☐ Summary Sheet, completed.
 - ☐ Applications that fail to adequately answer ALL the questions will NOT be considered for review. The Application should be NO MORE than two (2) pages total with one inch margins. The font should NOT be smaller than 10-point. Lines should be double-spaced. Each narrative question must be answered in the order presented. Each page should be numbered and have the name of your Project and Agency applying for funding.
 - ☐ Services to be Provided list, completed.
 - ☐ Schedule of Fees to be Charged. Please include a copy of your schedule of client fees. If the applicant does not require their clients to pay a co-payment, please explain why.
 - ☐ Balance Sheet and Annual Report. Please include a copy of your agency's most recent Audited Annual Report, with your one (1) page Balance Sheet on top of the Audited Annual Report.
 - ☐ Proof of Non-Profit Status. All agencies must supply a copy of proof of non-profit status. Proof of non-profit status can include, but is not limited to, correspondence from the Internal Revenue Service determining your exemption from federal income tax under section 501 (a) of the Internal Revenue Code as an organization described in section 501 (c) (3).
 - ☐ Checklist. Please include this completed Checklist with your Application.

ONLY Private Non-Profit Agencies and Public Entities
are eligible for funding
(Section 26-17-302(1), UCA).

**STATE PRIMARY CARE GRANTS PROGRAM
FOR MEDICALLY UNDERSERVED POPULATIONS**

State Fiscal Year 2005-2006 Summary Sheet

IDENTIFYING INFORMATION	
Title of Project:	
Name of Agency:	
Contact Name & Title:	
Mailing Address:	
Street Address (if different than mailing address):	
City, State, Zip:	
Telephone:	Fax:
Email Address:	
Tax Identification Number:	

PROJECT SUMMARY INFORMATION (October 1, 2005 through September 30, 2006)		
Dollar Amount for State Primary Care Grants Program Project: \$		
State Primary Care Grants Program Project Expects to Serve	Number of Project Users: The number of medically underserved individuals the State Primary Care Grants Program Project plans to serve.	Number of Project Encounters: The aggregate numbers of encounters that are expected to be provided.
The Precise Boundaries of the Area to be Served [City(s) and/or County(s)]:		

PROPOSED PROJECT BUDGET (October 1, 2005 through September 30, 2006)			
Line Item Category	Column A	Column B	Column C Column A + Column B = Column C
	Requested Project Funding	Other Sources of Project Funding	Total Project Funding
Salary & Fringe Benefits	\$	\$	\$
Travel	\$	\$	\$
Equipment	\$	\$	\$
Supplies	\$	\$	\$
Contractual	\$	\$	\$
Total Costs	\$	\$	\$

**STATE PRIMARY CARE GRANTS PROGRAM
FOR MEDICALLY UNDERSERVED POPULATIONS**

State Fiscal Year 2005-2006 Application

The Application should be NO MORE than two (2) pages total with one inch margins. The font should NOT be smaller than 10-point. Lines should be double-spaced. Each narrative question must be answered in the order presented. Each page should be numbered and have the name of the Project and the name of the Agency applying for funding. Please be concise and succinct. Note that the Project budget narrative (described below) is separate from the Application. Applications that are submitted after the deadline may be delayed or denied review.

Each question must be answered in the following order:

1. **PROJECT TARGET POPULATION(S):** Briefly describe the medically underserved population(s) that the Project objective(s) will serve and include an assessment of need for this population.
2. **PROJECT OBJECTIVES/EVALUATION:** Provide specific, measurable objective(s), as well as proposed activities, outcomes, and measures for each Project objective.
3. **PROJECT COLLABORATION:** Provide information about any existing or future partnerships, collaborative efforts, use of volunteers, or other resources that your Agency will use to complete the Project objective(s).
4. **PROJECT SUSTAINABILITY OF FUNDING:** Provide a plan of financing for the target population(s), *if State Primary Care Grants Program funding were no longer available*. Also provide evidence of "Other Sources of Funding" for the primary care services provided by your Project (e.g., funding from the Utah Department of Health, Cardiovascular Program, for blood pressure screening).
5. **PROJECT BUDGET NARRATIVE:** Please provide a brief Project budget narrative. The Project budget narrative must explain each Line Item Category of the proposed Project budget (see the Summary Sheet). Briefly describe the personnel who will oversee and/or complete Project activities. Explain other sources of funding included in the Project budget, such as grants, third party payments (e.g., Medicaid, Medicare, CHIP, private insurance), donations, etc.

NOTE: Project budgets should be for the Project period October 1, 2005 through September 30, 2006.

**STATE PRIMARY CARE GRANTS PROGRAM
FOR MEDICALLY UNDERSERVED POPULATIONS**

State Fiscal Year 2005-2006 Services to be Provided

Name of Applicant Agency _____

Name of individual responsible for completing this report _____

Telephone number _____

Services To Be Provided by Project		
In Column A, please check (T) all corresponding services that the Project expects to provide to eligible individuals. <i>Please note Project services only, not Agency-wide services.</i>		
SERVICE TYPE		COLUMN A
Primary Medical Care Services	General Primary Medical Care	
	Diagnostic Laboratory	
	Diagnostic X-ray	
	Diagnostic Tests/Screens/Analysis	
	Family Planning	
	Following Hospitalized Patients	
	HIV Testing	
	Immunizations	
	Mammography	
	Tuberculosis Therapy	
	Urgent Medical Care	
	24 Hour Coverage	
OB/GYN Care	Gynecologic Care	
	Pap Smear	
	Obstetric Care	
	Prenatal Care	
	Labor and Delivery Professional Care	
	Postpartum Care	
Dental Services	Preventive	
	Restorative	
	Emergency	

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State Fiscal Year 2005-2006 Services to be Provided

Name of Applicant Agency _____

Name of individual responsible for completing this report _____

Telephone number _____

Services To Be Provided by Project		
In Column A, please check (T) all corresponding services that the Project expects to provide to eligible individuals. <i>Please note Project services only, not Agency-wide services.</i>		
SERVICE TYPE		COLUMN A
Mental Health Services	Mental Health Treatment/Counseling	
	Developmental Screening	
	24 Hour Crisis Intervention/Counseling	
	Other Mental Health Services	
	Substance Abuse Treatment/Counseling	
	Other Substance Abuse Services	
Other Professional Services	Hearing Screening	
	Nutrition Services Other than WIC (Women, Infants, and Children Supplemental Nutrition Program)	
	Occupational/Vocational Therapy	
	Physical Therapy	
	Pharmacy Services	
	Vision Screening	
Enabling Services	Case Management	
	Child Care (during visit to clinic)	
	Discharge Planning	
	Health Education	
	Home Visiting	
	Interpretation/Translation Services	
	Nursing Home and Assisted-Living Placement	
	Outreach	
	Parenting Education	
	Transportation	

**STATE PRIMARY CARE GRANTS PROGRAM
FOR MEDICALLY UNDERSERVED POPULATIONS**

State Fiscal Year 2005-2006 Projections

Projections for Period: October 1, 2005 through September 30, 2006

Name of Applicant Agency _____

Name of individual responsible for completing this report _____

Telephone number _____

1. Expected Encounter ¹ information, October 1, 2005 through September 30, 2006

Baseline Data for Your Agency <i>Agency-wide data, Not Project data</i>	Expected State Primary Care Grants Program Project Encounters ¹
Total number of encounters ¹ <i>for your Agency's most recent fiscal year</i>	Total number of State Primary Care Grant Program Project patient encounters ¹ 10/01/2005 - 09/30/2006

For the Following Tables, Please Use Best Estimates (Projection) of Users Expected to be Served by the Project.

2. Expected Project Users ² by Age, October 1, 2005 through September 30, 2006

Age Groups	Number of Project Users ²
0 - 19	
20 - 64	
65 and over	
Total Project Users ²	

3. Expected Project Users ² by Income Level, October 1, 2005 through September 30, 2006

Percent of Poverty Level	Number of Project Users ²
100% and below	
101 - 200%	
Above 200%	
Unreported/unknown	
Total Project Users ²	

1 "Encounter" means a face-to-face contact between an eligible individual and the awarded Agency's provider who exercises independent judgement in the provision of services to the eligible individual and where the services provided under the State Primary Care Grants Program Project are rendered and recorded in the eligible individual's record.

2 Users are defined as "Eligible Individuals", who will receive at least one face-to-face encounter October 1, 2005 through September 30, 2006.

**STATE PRIMARY CARE GRANTS PROGRAM
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State Fiscal Year 2005-2006 Projections

Projections for Period: October 1, 2005 through September 30, 2006

Name of Applicant Agency _____

Name of individual responsible for completing this report _____

Telephone number _____

4. Expected Total Project Users ² by Insurance Status, October 1, 2005 through September 30, 2006

Number Project Users ² Uninsured	Number Project Users ² Underinsured

5. Expected Project Users ² by Race/Ethnicity, October 1, 2005 through September 30, 2006

Race/Ethnicity	Number of Project Users ²
Asian	
American Indian or Alaska Native	
Black or African American	
Native Hawaiian or Other Pacific Islander	
White	
Hispanic or Latino	
Other	
Unreported or Unknown	
Total Project Users ²	

- 1 "Encounter" means a face-to-face contact between an eligible individual and the awarded Agency's provider who exercises independent judgement in the provision of services to the eligible individual and where the services provided under the State Primary Care Grants Program Project are rendered and recorded in the eligible individual's record.
- 2 Users are defined as "Eligible Individuals", who will receive at least one face-to-face encounter October 1, 2005 through September 30, 2006.

**STATE PRIMARY CARE GRANTS PROGRAM
FOR MEDICALLY UNDERSERVED POPULATIONS**

UTAH CODE ANNOTATED, 26-18, PART 3

TITLE 26, CHAPTER 18
MEDICAL ASSISTANCE ACT

PART 3
ACCESS TO HEALTH CARE

26-18-301. Definitions.

As used in this part:

- (1) "Medically underserved population" means the population of an urban or rural area or a population group designated by the department as having a shortage of primary health care services.
- (2) "Primary health care" means:
 - (a) basic and general health care services given when a person seeks assistance to screen for or to prevent illness and disease, or for simple and common illnesses and injuries; and
 - (b) care given for the management of chronic diseases.
- (3) "Primary health care services" include, but are not limited to:
 - (a) services of physicians, all nurses, physician assistants, and dentists licensed to practice in this state under Title 58;
 - (b) diagnostic and radiologic services;
 - (c) preventive health services including, but not limited to, perinatal services, well-child services, and other services that seek to prevent disease or its consequences;
 - (d) emergency medical services;
 - (e) preventive dental services; and
 - (f) pharmaceutical services.

26-18-302. Department to award grants - Applications.

- (1) Within appropriations specified by the Legislature for this purpose, the department may make grants to public and nonprofit entities for the cost of operation of providing primary health care services to medically underserved populations.
- (2) Grants by the department shall be awarded based on applications submitted to the department in the manner and form prescribed by the department and by [Section 26-18-303](#). The application shall contain a requested award amount, budget, and narrative plan of the manner in which the applicant intends to provide the primary care services described in this chapter.

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- (3) Applicants under this chapter must demonstrate to the department that they will operate in a manner such that no person shall be denied service by reason of his inability to pay. This does not preclude the applicant from seeking payment from the patient, a third party, or government agency that is authorized or that is under legal obligation to pay such charges.

26-18-303. Content of applications.

Applications for grants under this chapter shall include:

- (1) a statement of specific, measurable objectives, and the methods to be used to assess the achievement of those objectives;
- (2) the precise boundaries of the area to be served by the entity making the application, including a description of the medically underserved population to be served by the grant;
- (3) the results of an assessment of need demonstrating that the population to be served has a need for the services provided by the applicant;
- (4) a description of the personnel responsible for carrying out the activities of the grant along with a statement justifying the use of any grant funds for the personnel;
- (5) letters and other forms of evidence showing that efforts have been made to secure financial and professional assistance and support for the services to be provided under the grant;
- (6) a list of services to be provided by the applicant;
- (7) the schedule of fees to be charged by the applicant;
- (8) the estimated number of medically underserved persons to be served with the grant award; and
- (9) other provisions as determined by the department.

26-18-304. Process and criteria for awarding grants.

The department shall establish rules in accordance with Title 63, Chapter 46a, Utah Administrative Rulemaking Act, governing the application form, process, and criteria it will use in awarding grants under this chapter. In awarding grants, the department shall consider the extent to which the applicant:

- (1) demonstrates that the area or a population group to be served under the application has a shortage of primary health care and that the services will be

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- located so that they will provide assistance to the greatest number of persons residing in such area or included in such population group;
- (2) utilizes other sources of funding, including private funding, to provide primary health care;
 - (3) demonstrates the ability and expertise to serve traditionally medically underserved populations including persons of limited English-speaking ability, single heads of households, the elderly, persons with low incomes, and persons with chronic diseases;
 - (4) demonstrates that it will assume financial risk for a specified number of medically underserved persons within its catchment area for a predetermined level of care on a prepaid capitation basis; and
 - (5) meets other criteria determined by the department.

26-18-305. Report on implementation.

The department shall report to the Health and Environment Interim Committee by November 1, 1994, and every year thereafter on the implementation of the grant program for primary care services. The report shall include a description of the scope and level of coverage provided to low-income persons by primary care grant programs and by the medical assistance program established in [Section 26-18-10](#). The report shall also include recommendations to minimize the loss of revenue by hospitals that serve a disproportionate share of persons under [Section 26-18-10](#).

**STATE PRIMARY CARE GRANTS PROGRAM
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UTAH ADMINISTRATIVE CODE, R434-30

R434. Health Systems Improvement, Primary Care and Rural Health.

R434-10. Rural Medical Financial Assistance.

R434-30. Primary Care Grants Program for Medically Underserved Populations.

R434-30-1. Authority and Purpose.

R434-30-2. Definitions.

R434-30-3. Grant Application Process and Form.

R434-30-4. Additional Criteria for Awarding Grants.

R434-30-1. Authority and Purpose.

This rule is required by Section 26-18-304. It implements the primary care grants program for medically underserved populations under Title 26, Chapter 18, Part 3.

R434-30-2. Definitions.

Terms used in this rule are defined in Section 26-18-301.

R434-30-3. Grant Application Process and Form.

The department shall solicit grant applications by issuing a request for grant applications. Applicants responding to the request for grant applications under this program shall submit their application as directed in the grant application guidance issued by the department.

R434-30-4. Additional Criteria for Awarding Grants.

- (1) In addition to the criteria listed in Section 26-18-304, the department shall consider:
 - (a) the reasonableness of the cost of the services to be given;
 - (b) degree to which primary health care services are provided comprehensively, extent to which supplemental services are provided, and extent to which services are conveniently located;
 - (c) demonstrated ability and willingness of applicant to systematically review the quality of care;
 - (d) commitment of applicant to sustain or enhance primary health care capacity for underserved, disadvantaged, and vulnerable populations; and
 - (e) degree to which the application is feasible, clearly described, and ready to be implemented.